

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPL
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Drilling well	5. LEASE DESIGNATION AND SERIAL NO. NM 021029
2. NAME OF OPERATOR DAVID FASKEN ✓	6. IF INDIAN, ALLOTTEE, OR TRIBAL RECEIVED
3. ADDRESS OF OPERATOR 608 First National Bank Building, Midland, Texas 79701	7. UNIT AGREEMENT NAME MAR 06 1981
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 3300' FSL & 1980' FEL	8. FARM OR LEASE NAME C. D. Shell Federal Comm. OFFICE
14. PERMIT NO.	9. WELL NO. 4
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3748.8' GR	10. FIELD AND POOL, OR WILDCAT Cemetery Morrow Gas
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 5, T-21-S, R-24-E
	12. COUNTY OR PARISH Eddy
	13. STATE New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

1. Drilled to 4940' w/fresh water & installed PVT & flowline sensor.
2. 3-27-79, TD 6365', increasing potash to 4%.
3. 3-29-79, TD 7049', tested BOP's, choke manifold, hydril, casing head & spool.
4. 4-4-79, TD 9573', DST #1 from 9540'-9573', details attached.
5. 4-6-79, TD 9637', DST #2 from 9615'-9637', " "
6. 4-7-79, TD 9685', DST #3 from 9610'-9685', " "
7. 4-9-79, TD 9840', DST #4 from 9735'-9840', " "
8. 4-11-79, TD 10,000', logging---CNL-FDC & DLL.
9. 4-13-79, TD 10,000', straddle DST #5 from 9680'-9730', details attached; straddle DST #6 from 4700'-4750', details attached.
10. 4-14-79, TD 10,000', P&A well as follows: Mud characteristics--vis 49, wt 9.6, wI 12.8
Cement plug #1 125 sx 9800'-9450'
Cement plug #2 80 sx 8700'-8500'
Cement plug #3 70 sx 7100'-6900'
Cement plug #4 30 sx 5600'-5500'
Cement plug #5 30 sx 4300'-4200'
Cement plug #6 60 sx 3100'-2900'
11. 4-18-79, 10 sx surface plug set & dry hole marker erected.

18. I hereby certify that the foregoing is true and correct

SIGNED Robert H. Angevine TITLE AgentDATE 4-24-79

(This space for Federal or State office use)

APPROVED BY (Orig. Sgd.) PETER W. CHESTER TITLE _____DATE MAR 5 1981

CONDITIONS OF APPROVAL, IF ANY: